Atty. Docket No. 033773.177

U.S. Application No. 10/064,156

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| In re the application of:   | )   | CONFIRMATION NO.: 5103     |
|-----------------------------|-----|----------------------------|
| Wenhui MEI                  | )   |                            |
| U.S. Serial No.: 10/064,156 | )   | Group Art Unit: 2125       |
| Filed: June 14, 2002        | )   |                            |
| U.S. Patent No.: 7,164,961  | ) . | Examiner: Zoila E. CABRERA |
| Issued: January 16, 2007    | )   |                            |

For: MODIFIED PHOTOLITHOGRAPHY MOVEMENT SYSTEM

## PETITION TO EXPUNGE INFORMATION UNINTENTIONALLY SUBMITTED IN APPLICATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

On June 29, 2011, a paper was unintentionally submitted in the above-identified application. The paper entitled Response to Office Action Dated Aril 1, 2011 was intended to be submitted in a different application, and was subsequently filed in that correct application on June 29, 2011.

Applicants state the following: that this application is granted and that the prosecution on the merits is closed; the information to be expunged is not material to this application under 37 CFR 1.56; the information submitted was unintentionally submitted and the failure to obtain its return may cause irreparable harm to the party who submitted the information or to the party in

been made public Credit Card Refund Total:

\$200.00

Am Exp..: XXXXXXXXXXXXXX1317

Adjustment date: 10/04/2011 CKHLOK 0/711/2011 INTEFSW 00012688 10064156 01 FC:1463 -200.00 OF

Atty. Docket No. 033773.177

U.S. Application No. 10/064,156

A copy of the USPTO Pair Bibliographic Data sheet is enclosed and is marked up to identify the documents to be expunged.

Accordingly, Applicants respectfully request that the response filed on June 29, 2011 in error under the above-identified application be expunged from the record under 37 CFR 1.59(b).

A petition fee of \$200.00 as set forth in 37 CFR 1.17(g) is submitted herewith. The Office is authorized to charge any additional fees or credit any overpayments in connection with this filing to Deposit Account No. 02-4300, Attorney Docket No. 033773.177.

Respectfully submitted, SMITH, GAMBRELL & RUSSELL, LLP

By:

Michael A. Makuch, Reg. No. 32,263

1130 Connecticut Avenue, NW - Suite 1130

Washington, D.C. 20036 Telephone: (202) 263-4300 Facsimile: (202) 263-4329

Dated: July 8, 2011

## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND                                |                                   |                 |             |  |  |
|--|-----------------------------------|-----------------|-------------|--|--|
| 1 Date of Request: 10/4/11 2 Serial/Patent # 10/064 156      |                                   |                 |             |  |  |
| 3 Please refund the following fee(s):                        | 4 PAPER<br>NUMBER                 | 5 DATE<br>FILED | 6 AMOUNT    |  |  |
| Filing   |                                   |                 | \$          |  |  |
| Amendment  |                                   |                 | \$          |  |  |
| Extension of Time ,  |                                   |                 | \$          |  |  |
| Notice of Appeal/Appeal                                      |                                   |                 | s           |  |  |
| Petition   |                                   | 7/8/4           | \$ 200      |  |  |
| Issue  |                                   | 17074           | \$          |  |  |
| Cert of Correction/Terminal Disc.                            |                                   |                 | \$          |  |  |
| Maintenance  |                                   |                 | \$          |  |  |
| Assignment   |                                   |                 | \$          |  |  |
| Other  |                                   |                 | \$          |  |  |
|  | 7 TOTAL AMOUNT<br>OF REFUND \$    |                 | \$ 200      |  |  |
|  | 8 TO BE REFUNDED BY: Cred. + Carl |                 |             |  |  |
| 10 REASON:   | Treasury Check                    |                 |             |  |  |
| Overpayment  | C:                                | redit Depo      | osit A/C #: |  |  |
| Duplicate Payment  | 9                                 |                 |             |  |  |
| No Fee Due (Explanation):                                    |                                   |                 |             |  |  |
| No Ref. tim weeled   |                                   |                 |             |  |  |
|  |                                   |                 |             |  |  |
|  |                                   |                 |             |  |  |
| 11 REFUND REQUESTED BY:                                      |                                   |                 |             |  |  |
| TYPED/PRINTED NAME: Carl Fried man TITLE: Petitions Examiner |                                   |                 |             |  |  |
| SIGNATURE: PHONE: 2-6842                                     |                                   |                 |             |  |  |
| OFFICE: Office of Petitions                                  |                                   |                 |             |  |  |
| THIS SPACE RESERVED FOR FINANCE USE ONLY:                    |                                   |                 |             |  |  |
| APPROVED: Which  | DATE: _                           | 10/4            | 1//         |  |  |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

PORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B